## PART B - FEE(S) TRANSMITTAL

NOV O	his <b>form</b> together wi		or <u>Fax</u>	Mail Stop ISSUI Commissioner for P.O. Box 1450 Alexandria, Virg (571) 273-2885 ICATION FEE (if requon of maintenance fees v	or Patents ginia 22313-1450	should be completed where
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLIC appropriate. An earther corresponded including the Patent, advance orders and notification indicated unless present believed the indicated unless in Block 1, by (a) specifying a new of maintenance fee notification directed otherwise in Block 1, by (a) specifying a new of maintenance fee notification of the property				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)		
FC:2501 700.00 OP					<b>Y</b>	(Date)
APPLICATION NO.	FILING DATE	FII	RST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/936,726 01/02/2002 Neil Porter 08364.0025 8955 TITLE OF INVENTION: BIOCHEMICAL SYNTHESIS APPARATUS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES \$700		\$0	\$700	11/14/2005	
EXAMINER ART UN				CLASS-SUBCLASS	]	•
WINSTON, RANDALL O 1655				435-041000	-	
1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1.  "Fee Address" indicate PTO/SB/47; Rev 03-02.  Number is required.	(1) the names of or agents OR, all (2) the name of registered attorn 2 registered pate listed, no name	f a single firm (having as a member a ney or agent) and the names of up to tent attorneys or agents. If no name is will be printed.  2 Farabow, Garrett and Dunner, L.L.P.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Biodiversity Limited  Great Britain						
Please check the appropriate	assignee category or catego	ries (will not be print	ed on the patent)	: 🗖 Individual 🚨 Co	orporation or other private g	group entity Government
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